PATENT	APPLICATION	FEE DETE	RMINATION RECO	ORD
	Effective	October 1	2000	

69751836

Application or Docket Number

	Cilective October 1, 2000											
		S FILED - PART I (Column 1)		(Column 2)		SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TOTAL CLÀIMS		54				RATI	Π	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		54 minus 20=		• 34		X\$ 9	=		OR	X\$18=	612.00	
INDEPENDENT CLAIMS			5 minus 3 =		•	2	X40:	7	,	20	X80=	go
MULTIPLE DEPENDENT CLAIM PR			RESENT					ᅱ		OR		80
* If the difference in column 1 is less than zero, ent			ro, ente	r "0" in c	olumn 2	+135	_		OR	+270=	1402.00	
CLAIMS AS AMENDED - PART II								L		OR	TOTAL	
(Column 1)			MENDED	(Colui	mn 2)	(Column 3)	SMAI	L E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	• 45	Minus	51		= Ø	X\$ 9	=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus			=	X40=			OR	X80=	
L	THOS THESE	TATALIOIA OF IN	OCTIPLE DEF	ENDEN	1 CLAIN		+135	=		OR	+270=	
<u> </u>							TOT ADDIT. F			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	70011.1				ADDIT. I EL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	···	T.C.I. ALAA	-	X40:			OR	X80=	
L	THOTPRESE	INTATION OF IM	OLITE DE	EINDEIA	CLAIM		+135	=	-	OR	+270=	
	•	4					TO' ADDIT. F			OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,,,,,,				NOOH. 1 EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST 1BER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL A11	•	X40=			OR	X80=	
	I INST PRESE	INTATION OF M	OLITPLE DEI	CNUEN	I CLAIM		+135			OR	+270=	
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2, writ	e "0" in co	ilumn 3.	101				TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											